

<b>SERIAL NUMBER</b> 09/436,990	<b>FILING DATE</b> 11/09/99	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> <del>2712</del> 2615	<b>ATTORNEY DOCKET NO.</b> 1807.0832
------------------------------------	--------------------------------	---------------------	--	---

**APPLICANT**

CLAUDE LE DANTEC, LA BASSE BEAUCE, FRANCE.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED

RL None

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

RL None

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED                  FRANCE                  9814149                  11/10/98

RL

  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/09/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> no Verified and Acknowledged <u>RL</u> <input type="checkbox"/> Yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <small>Examiner's Initials                  Initials</small>	<b>STATE OR COUNTRY</b> FRX	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 91	<b>INDEPENDENT CLAIMS</b> 11
--	--------------------------------	-----------------------------	---------------------------	---------------------------------

**ADDRESS**

SEE CUSTOMER NUMBER: 005514

**TITLE**

DIGITAL FORMAT COMPRESSION METHOD AND DEVICE, AND DECOMPRESSION METHOD AND DEVICE

<b>FILING FEE RECEIVED</b>  \$3,052	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
---	--	---